



2024-2025 Tuition Contract

Montessori Center Room, Inc. agrees to accept your child _____ for the 2024-2025 school year in our **Pre-K Program (8:30am - 11:30am)** or **Kindergarten Program (8:30am - 3:00pm)**, commencing in August 2024. In order to hold this position, you must make a non-refundable deposit (\$500) and return this signed contract, **no later than February 15, 2024**. Pre-K tuition for the 2025-2025 school year is \$6,950.00 and Kindergarten tuition is \$8,950.00. There are two possible payment plans to choose from:

Pre-K (8:30am - 11:30am)

- One (1) payment of \$6,450.00 due August 15, 2024
- Ten (10) payments of \$645.00 due August 15, 2024, September 15, 2024, October 15, 2024, November 15, 2024, December 15, 2024, January 15, 2025, February 15, 2025, March 15, 2025, April 15, 2025, May 15, 2025

Kindergarten (8:30am - 3:00pm)

- One (1) payment of \$8,450.00 due August 15, 2024
- Ten (10) payments of \$845.00 due August 15, 2024, September 15, 2024, October 15, 2024, November 15, 2024, December 15, 2024, January 15, 2025, February 15, 2025, March 15, 2025, April 15, 2025, May 15, 2025.

**There is a 10% discount if you elect to pay your monthly payments via ACH.*

***There is a 10% sibling discount for families with multiple children enrolled.*

Select payment plan from above options and each parent and/or legal guardian initials the following:

_____ I understand this is a legal and binding agreement.

_____ I understand that by signing this contract I am accepting responsibility to pay a full year tuition (processed via Procure)

_____ I understand that if I later decide to withdraw my child from Montessori Center Room, I am still responsible for my tuition obligation unless I ask for and receive a formal waiver from the board of trustees.

_____ I understand that waivers are granted only in cases where a child must withdraw from Montessori Center Room due to a family moving away from the Greater Cincinnati area; a medical condition significantly affecting the child's ability to attend the school; or other extenuating circumstances.

_____ I understand that if my child is required to leave Montessori Center Room at the request of the school due to issues outside of my control, I will be given a prorated refund. A prorated refund will be given to the family if a student is expelled or dismissed by Montessori Center Room for reasons outlined in the Policies and Procedures Manual.

_____ I understand that Montessori Center Room makes no guarantee regarding changes in the classroom staff or student to teacher ratios.

_____ I understand that Montessori Center Room is a parent-owned, non-profit school that requires both fundraising and volunteer support of the families whose children attend, and I hereby commit to participate in fundraising and/or volunteer efforts to support the school.

_____ I understand and agree to pay a late fee of \$25.00 for any and all monthly tuition payments received by Montessori Center Room after the 5th day of the month in which it is due or for tuition payments that have been declined unless I have prior written permission from the Director and/or Treasurer of the Board of Trustees which provides an alternate payment schedule. This late fee will be strictly enforced.

Student Name: _____

I agree with the above conditions.

Each Parent and/or Legal Guardian must sign.

Parent/Guardian Signature _____ Date: _____

Parent/Guardian Signature _____ Date: _____

Executive Director Signature _____ Date: _____